



Appendix E



**Appendix E-1:
Storm Water Quarterly Compliance
Inspection Report**



Storm Water Quarterly Compliance Inspection Report

[] Division

[] Site

Quarter: (Month/Year - Month/Year)

Inspection Date: _____

Inspector: _____

Phone #: _____

Last Inspection Date: _____

Weather: (circle one) Dry Rain Snow Icy

Note: If this inspection is intended to take the place of a routine Site Inspection, keep this Quarterly Compliance Inspection Report and accompanying Responsive Action Log with the Storm Water Plan ("SWP").

Outfalls, Entrances and Streets

A. <u>Outfalls</u> : Excess sediment or other pollutants controlled per SWP from leaving the Site?	Y	N	N/A
B. <u>Vehicle Tracking</u> : Installed and maintained per SWP?	Y	N	N/A
C. <u>Streets</u> : Excess soil kept off streets?	Y	N	N/A

Storm Water Controls

D. <u>Erosion and Sediment Controls</u> : Installed and maintained per SWP?	Y	N	N/A
E. <u>Soil Stabilization</u> : Implemented and maintained per SWP?	Y	N	N/A
F. <u>Stock Piles</u> : Properly located and stabilized per SWP?	Y	N	N/A

Non-Storm Water Controls

G. <u>Concrete, Stucco, Paint (etc.) Washouts</u> : Located, installed and maintained per SWP?	Y	N	N/A
H. <u>Solid & Hazardous Wastes</u> : Trash, debris and hazardous materials properly managed?	Y	N	N/A
I. <u>Sanitary Waste</u> : Portable toilets properly located and maintained?	Y	N	N/A

Storm Water Plan and Related Documents

J. Is the Site Storm Water Compliance Representative ("SSWCR") contact information provided on Site as required; if so, is it current?	Y	N	N/A
K. If required, is the Applicable Permit and/or NOI on Site?	Y	N	N/A
L. Is the SWP available on Site or its location posted as required?	Y	N	N/A
M. Does the SWP match current Site conditions?	Y	N	N/A
N. Are BMPs required by the SWP appropriate for existing Site conditions?	Y	N	N/A
O. If there have been any government inspections evaluating compliance with the Applicable Permit (NPDES only) since the last Site Inspection, have all issues been addressed in response to that government inspection?	Y	N	N/A
P. Was the Site Inspection Report from the last Site Inspection (1) signed by the SSWCR and (2) certified if and as required by the Applicable Permit?	Y	N	N/A



[] Division
[] Site

Storm Water Quarterly Compliance Inspection Report

Quarter: (Month/Year - Month/Year)

Inspection Date: _____

Q. Have all Responsive Actions from prior Site Inspections been timely addressed? **Y** **N** **N/A**

If "N", list all actions that were not addressed or are not yet completed (explaining why, if known):

(Note: For Responsive Actions identified during this Inspection, use the Responsive Action Log on the following page.)

Uncompleted Responsive Actions From Prior Inspections		
Responsive Action Number	Date of Inspection	Explanation

Name and Title of Inspector

Signature of Inspector

Date

If this inspection substitutes for a routine Site Inspection, include a certification in this space when required by the Applicable Permit using the certification language required by that Permit.

If this inspection substitutes for a routine Site Inspection and if a Designee (e.g., storm water consultant) conducts the inspection, the Site Storm Water Compliance Representative must review and sign the completed report below:

Name

Signature

Date



[] Division
[] Site

Storm Water Quarterly Compliance Inspection Report

Quarter: (Month/Year - Month/Year)

Inspection Date: _____

Responsive Action Log

(for Action Items found during this Inspection)

Ref #	Deficiency (Action Item)	Location	Addressed By	Date	Responsive Action Taken

Additional Comments:



**Appendix E-2:
Storm Water Quarterly Compliance
Review and Summary**



[] Division

Storm Water Quarterly Compliance Review and Summary

Quarter: (Month/Year - Month/Year)

Quarterly Compliance Review

Site Name: _____

Date of Quarterly Compliance Inspection: _____

Quarterly Compliance Inspector: _____

Division Storm Water Compliance Representative: _____

Site Storm Water Compliance Representative(s): _____

INSTRUCTIONS

This Quarterly Compliance Review Form and accompanying Quarterly Compliance Summary Form should be maintained at the Division offices; they should not be kept with the Storm Water Plan ("SWP").

If the Division Storm Water Compliance Representative conducts the Quarterly Compliance Inspection, complete only boxes 1 and 2 for each of the topics listed below. If a Designee (e.g., storm water consultant) of the Division Storm Water Compliance Representative conducts the Quarterly Compliance Inspection, the Designee must complete boxes 1 and 2 and the Division Storm Water Compliance Representative must complete box 3 for each of the topics listed below.

Upon completion of the Quarterly Compliance Inspection, each of the following topics should be reviewed with all of the Site Storm Water Compliance Representatives for the Site. When that review is completed, the Division and all of the Site Storm Water Compliance Representatives shall sign the form in the space provided on the last page of this form.

Physical Condition of the Site and BMPs

1. Are there compliance issues related to the physical condition of the site or BMPs? ☐ Y ☐ N
If yes, what are the causes?

2. If yes is checked in Question 1, recommended actions to address these issues include:

3. If yes is checked in Question 1 and the Quarterly Compliance Inspection was conducted by a Designee, does the Division Storm Water Compliance Representative have additional recommendations? ☐ Y ☐ N
If yes, list the recommendations:



[] Division

Storm Water Quarterly Compliance Review and Summary

Quarter: (Month/Year - Month/Year)

Adequacy of the Site Storm Water Plan and Recordkeeping Procedures

1. Are there inadequacies in the Storm Water Plan or the recordkeeping procedures? If yes, describe the inadequacies.	<input type="checkbox"/> Y	<input type="checkbox"/> N
2. If yes is checked in Question 1, recommended actions to address these issues include:		
3. If yes is checked in Question 1 and the Quarterly Compliance Inspection was conducted by a Designee, does the Division Storm Water Compliance Representative have additional recommendations? If yes, list the recommendations:		

Contractor Compliance with Storm Water Requirements

1. Are there any storm water compliance issues being caused by contractors or subcontractors? If yes, what are the causes?	<input type="checkbox"/> Y	<input type="checkbox"/> N
2. If yes is checked in Question 1, recommended actions to address these issues include:		
3. If yes is checked in Question 1 and the Quarterly Compliance Inspection was conducted by a Designee, does the Division Storm Water Compliance Representative have additional recommendations? If yes, list the recommendations:		



[] Division

Storm Water Quarterly Compliance Review and Summary

Quarter: (Month/Year - Month/Year)

Number of Responsive Actions Not Performed in the Time and Manner Required by the Applicable Permit

1. Are there any compliance issues with the number of Responsive Actions not performed in the time and manner required by the Applicable Permit? If yes, what are the causes?	<input type="checkbox"/> Y	<input type="checkbox"/> N
2. If yes is checked in Question 1, recommended actions to address these issues include:		
3. If yes is checked in Question 1 and the Quarterly Compliance Inspection was conducted by a Designee, does the Division Storm Water Compliance Representative have additional recommendations? If yes, list the recommendations:		

Recurring Compliance Issues at the Site

1. Are there recurring compliance issues at this Site? If yes, what are they and what are the causes?	<input type="checkbox"/> Y	<input type="checkbox"/> N
2. If yes is checked in Question 1, recommended actions to address these issues include:		
3. If yes is checked in Question 1 and the Quarterly Compliance Inspection was conducted by a Designee, does the Division Storm Water Compliance Representative have additional recommendations? If yes, list the recommendations:		



[] Division

Storm Water Quarterly Compliance Review and Summary

Quarter: (Month/Year - Month/Year)

Quarterly Compliance Review Summary

Discharges of pollutants prior to obtaining coverage under an Applicable Permit (if applicable during this quarterly review period):	Yes	No	N/A
If yes, total number of days: _____			
Failure to perform or material failure to document the Pre-Construction Inspection and Review (if applicable during this quarterly review period):	Yes	No	N/A
Had the Site Storm Water Compliance Representative(s) been trained in accordance with KB Home's storm water training program as of this Quarterly Compliance Inspection and Review?	Yes	No	
Site Inspections:			
Total number of all Site Inspections required during the quarter:	_____		
Total number of documented Site Inspections:	_____		
Percentage Non-Compliance:	_____		
Total number of times a SWP was not available or its location posted during a Site Inspection:	_____		
Percentage Non-Compliance:	_____		
Responsive Actions:			
Total number of Responsive Actions identified during quarter:	_____		
Total number of Responsive Actions not addressed within the time allowed by the Applicable Permit:	_____		
Percentage Non-Compliance:	_____		

The Division Storm Water Compliance Representative shall review the Quarterly Compliance Review Form with all of the Site Storm Water Compliance Representatives for the Site. When that review is complete, the Division Representative and each of the Site Storm Water Compliance Representatives shall sign the form here:

Title

Signature

Date

Division Storm Water Compliance Representative:

Site Storm Water Compliance Representative(s):
